IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:) Chapter 11
W.R. GRACE & CO., <u>et al</u> .,	Case No. 01-1139 (JKF) Jointly Administered
Debtors.) Objection Date: January 12, 2012 at 4:00 p.m. Hearing: Schedule if Necessary (Negative Notice)
DAVID T. AUSTERN, ASBESTOS FOR COMPENSATION AND REIM	THIRD MONTHLY INTERIM APPLICATION OF SPI FUTURE CLAIMANTS' REPRESENTATIVE IBURSEMENT OF EXPENSES FOR THE PERIOD 1 THROUGH NOVEMBER 30, 2011
Name of Applicant:	David T. Austern, Asbestos PI Future Claimants' Representative ("FCR")
Authorized to Provide Professional Services to:	As the FCR
Date of Retention:	May 25, 2004
Period for which compensation is sought:	November 1, 2011 through November 30, 2011

Amount of Compensation (100%) sought

as actual, reasonable, and necessary: \$850.00

80% of fees to be paid: $$680.00^{1}$

Amount of Expense Reimbursement sought

as actual, reasonable and necessary: \$ 0.00

Total Fees @ 80% and

100% Expenses: \$680.00

¹ Pursuant to the Administrative Order, as Amended dated April 17, 2002, absent timely objections, the Debtors are authorized and directed to pay 80% of fees and 100% expenses.

This is an:	interim	X	monthly	final application.
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The total time expended for fee application preparation during this time period is 0.00 hours and the corresponding fees are \$0.00 and expenses are \$0.00. Such time spent on such tasks will be requested in subsequent monthly interim applications or have been performed by the FCR's bankruptcy counsel, Orrick, Herrington & Sutcliffe LLP.

COMPENSATION SUMMARY NOVEMBER 2011

Name of Professional	Position of Applicant	Hourly Billing	Total Billed	Total
<u>Person</u>		Rate	Hours	Compensation
David T. Austern	Future Claimants' Representative	\$500.00	1.70	\$850.00
Grand Total:			1.70	\$850.00
Blended Rate: \$500.00				

Total Fees: \$850.00 Total Hours: 1.70 Blended Rate: \$850.00

COMPENSATION BY PROJECT CATEGORY

Project Category	Total Hours	Total Fees
Plan & Disclosure Statement	1.70	\$850.00
TOTAL	1.70	\$850.00

EXPENSE SUMMARY

Expense Category	Total
No Expenses	\$0.00
TOTAL	\$0.00

Respectfully submitted,

Dated: December 12, 2011 /S/ DAVID T. AUSTERN

David T. Austern Claims Resolution Management Corporation 3110 Fairview Park Drive, Suite 200

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